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Atty. Dkt. No. 051448-0201

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Gil DUDKIEWICZ et al.

Title: SYSTEM AND METHOD FOR
GENERATING METADATA FOR
PROGRAMMING EVENTS

Appl. No.: 09/991,807

Filing Date: 11/16/2001

Examiner: J. SALCE

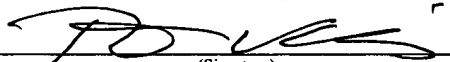
Art Unit: 2614

Confirmation 1953
Number:

CERTIFICATE OF EXPRESS MAILING
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.110 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

EV 830406465 US June 27, 2006
(Express Mail Label Number) (Date of Deposit)

Ruthie Vallejo
(Printed Name)


(Signature)

**NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD
OF PATENT APPEALS AND INTERFERENCES**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant hereby appeals to the Board of Patent Appeals from the decision of the non-final Office action dated December 27, 2005, of the Examiner rejecting Claims 1-6, 10-16 and 20-44.

☒ Applicant claims small entity status.

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. § 1.136(a) for the total number of months checked below:

☒ Notice of Appeal Fee

☒ To be paid as detailed below

☐ Not required (Fee paid in prior appeal)

The required fees are calculated below:

<input checked="" type="checkbox"/>	Notice of Appeal Fee	\$500.00
<input checked="" type="checkbox"/>	Extension for response filed within the third month:	\$1,020.00
<input type="checkbox"/>	Extension:	\$0.00
	FEE TOTAL:	\$1,520.00
<input checked="" type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):	\$760.00
	TOTAL FEE:	\$760.00

A credit card payment form in the amount of \$760.00 is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 27 June 2006

By Ronald Coslick

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